

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

10682375

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	5	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	5 minus 20 =	
INDEPENDENT CLAIMS	5 minus 3 =	2

MULTIPLE DEPENDENT CLAIM PRESENT

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	3	Minus	20
Independent	1	Minus	5	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
XS 9=		OR XS18=	
X43=	86	OR X86=	
+145=		OR +290=	
TOTAL	471	OR TOTAL	

SMALL ENTITY OR OTHER THAN
OTHER THAN
OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
95		50	
XS 8=		XS18=	
100		200	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	3	Minus	20
Independent	1	Minus	5	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	—	=
Independent	Minus	---	—	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 1.

* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, write "20".

*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, write "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number paid in the appropriate box in column 1.